

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155568		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 08/08/2012	
NAME OF PROVIDER OR SUPPLIER WILLIAMSPORT NURSING AND REHABILITATION				STREET ADDRESS, CITY, STATE, ZIP CODE 200 SHORT ST WILLIAMSPORT, IN 47993			
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F0000	<p>This visit was for Investigation of Complaints IN00112217, IN00113092 and IN00113796.</p> <p>Complaint IN00112217: Unsubstantiated, due to lack of evidence</p> <p>Complaint IN00113092 : Substantiated, Federal/State deficiencies related to the allegation are cited at F364.</p> <p>Complaint IN00113796: Substantiated, Federal/State deficiencies related to the allegation are cited at F364.</p> <p>Dates of survey: August 6, 7 and 8, 2012</p> <p>Facility number: 000449 Provider number: 155568 AIM number: 100290350</p> <p>Survey team: Vanda Phelps, R.N.</p> <p>Census bed type: 70 SNF/NF 70 Total</p> <p>Census payor type: 18 Medicare 41 Medicaid</p>			F0000	<p>The creation and submission of this plan of correction does not constitute an admission by this provider of any conclusion set forth in the statement of deficiencies, or of any violation of regulation. Provider desires that the 2567 plan of correction be considered the letter of credible allegation and requests a desk review certification of compliance on or after 09-22-2012. James D. Sizemore, HFA Executive Director</p>		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 08/30/2012
FORM APPROVED
OMB NO. 0938-0391

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	11 Other 70 Total Survey sample: 11 These deficiencies reflect state findings cited in accordance with 410 IAC 16.2 Quality review completed on August 9, 2012 by Bev Faulkner, RN .						

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F0364 SS=F	<p>483.35(d)(1)-(2) NUTRITIVE VALUE/APPEAR, PALATABLE/PREFER TEMP Each resident receives and the facility provides food prepared by methods that conserve nutritive value, flavor, and appearance; and food that is palatable, attractive, and at the proper temperature. Based on observation, record review and interviews, the facility failed to provide palatable meals due to improper temperatures on a daily basis. This had the potential to impact 69 of the 70 residents at the facility.</p> <p>Findings include:</p> <p>Residents were interviewed during this investigation on August 6-8, 2012. Exact times are not given to protect the identity of these residents who wished to remain anonymous. Six of six residents, who had been identified by the facility as</p>		F0364	<p>F364 483.35 (d)(1)-(2) Nutritive Value/Appear, Palatable/Prefer Temp Each Resident received and the facility provides food prepared by methods that conserve nutritive value, flavor, and appearance; and food that is palatable, attractive, and at the proper temperature. What corrective actions will be accomplished for those Residents found to have been affected by the deficient practice? 1.) All Residents identified were not harmed 2.) Food items will be served at proper temperatures in accordance with temperature standards How other Residents having the potential to be affected by the same deficient practice will be identified and what corrective actions will be taken? 1.) All Residents have the potential to be affected 2.) All Dietary staff was re-educated to proper cooling/heating methods on 8/20/12 by the Executive Director (See attachment 1-1) 3.) Juices will be wrapped individually before being submerged in ice to ensure proper temperature of beverages. Facility has switched to milk cartons which will be submerged in ice to ensure proper</p>		09/22/2012	

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	<p>interviewable, indicated the food was cold on a daily basis.</p> <p>1. Interview with Resident B indicated the cold food is "disgusting." "It's been that way since day one." "I'd ask for it to be warmed, but it would take forever, so I just don't."</p> <p>2. Interview with Resident F indicated the food temperature has been "cold forever. You get sort of used to it after a while. We talk about it all the time."</p> <p>3. Interview with Resident G indicated "the food is always cold." Resident G added that the eggs were "always cold, not even warm." Resident G also indicated using as many condiments as allowed to make</p>				<p>temperature.4.) Hot food will be placed on the steam table when ready to serve5.) The plate warmer and steam table was checked and found to be within normal limits by Maintenance staff on 8/6/12.What measures will be put into place to ensure that the deficient practice does not recur?1.) Thermometers were inspected and calibrated on 8/6/12 according to manufacturer's guidelines.2.) Temperatures will be taken prior to meal service to ensure proper temperature3.) Plates will be heated or chilled prior to meal service to ensure food is served at palatable temperatures4.) Hot food will be placed on the steam table when ready to serve5.) Beverages will be iced prior to and replaced as needed during meal service to ensure the proper temperature is maintained6.) Insulated bases and covers will be utilized for all meals for Residents eating in their room How the corrective action will be monitored to ensure the deficient practice will not recur?1.) Dietary Manager or designee will complete daily audits of temperature logs x30 days to ensure temperatures are being recorded then every other day x30 days then quarterly thereafter for 6 months. Findings will be reviewed during monthly Continuous Quality Improvement meetings.2.) Dietary Manager or designee will receive test trays at</p>		

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	<p>the cold food edible. Resident G indicated they no longer asked staff to warm the food because "they are so busy."</p> <p>4. Interview with Resident J indicated the food is "just plain cold every time. They even served cold pork and beans!"</p> <p>5. Interview with Resident R indicated the cold food was "the worst part of being in this nursing home. The rest of it isn't so bad, but the food! All three meals, every day, day in and day out." Observation of the lunch intake on 8/7/12 indicated only bites had been eaten.</p> <p>6. Interview with Resident S indicated, "the food isn't as warm as it should be. It bothers me, but not as much as</p>		<p>the beginning and the end of meal service to test temperatures of all items, temperatures of the test trays will be recorded. Findings will be reviewed during monthly Continuous Quality Improvement meetings. 3.) Executive Director or designee will complete meal observations x 3 meals weekly for 30 days then x 3 meals semi-weekly for 30 days then quarterly for 6 months thereafter using the Continuous Quality Improvement meetings. Residents will be questioned by the Dietary Manager or designee to ensure Residents believe the food temperatures meet their expectations and needs. If temperatures do not meet Residents expectations, adjustments to the food temperature will be made.4.) 10 Residents will be interviewed weekly by the Social Service Director or designee x 30 days then semi-weekly x 30 days then monthly for 6 months thereafter using the continuous quality improvement tool to ensure food is being served palatable. Findings will be reviewed during monthly continuous quality improvement meetings.</p>				

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	<p>others I know." The resident stated, "Cold food just isn't very appetizing."</p> <p>Interview of the family of Resident P on 8/8/12 at 10:27 a.m., indicated the food there is "cold, cold, cold!" She indicated the resident eats in the main dining room and the resident's condition requires good nutrition and Resident P "won't eat because it's so (expletive) cold."</p> <p>On 8/8/12 at 12:28 p.m., during lunch service, a room tray was picked at random to be temperature tested. It was observed at the time that the room trays were being served as soon as they arrived on the unit. The Administrator measured the temperatures as follows:</p>						

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	<p>Soup 115.5 degrees F. This bowl of soup was not covered to retain warmth.</p> <p>Milk 57.9 degrees F This glass was not covered.</p> <p>Grilled Chicken Caesar Salad 96.1 degrees F. This plate was covered.</p> <p>These temperatures indicated the soup was too cool and the milk and salad were too warm.</p> <p>Review of the meal temp log on 8/8/12 at 1:10 p.m., indicated the only temp on the salad was the chicken strips, which had been cooked separately and were to be added to the salad.</p> <p>That temp was 120.0.</p> <p>Milk was 38.7 degrees F.</p> <p>The soup temperature was not recorded.</p>						

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	<p>Interview with the cook on 8/8/12 at 1:15 p.m., indicated the above temperatures had been taken at 11 a.m., just before serving started in the kitchen. The test tray temperatures had been taken at 12:28 p.m. She indicated the pasta had been cooked that morning and cooled, but had no temperature recorded for that. The pre-cooked meat was heated and added to the pasta and greens. It was intended to be a cold salad with hot chicken.</p> <p>Interview with the Administrator at 1:30 p.m., indicated the warm milk temperature might be because, even though the milk was on ice for meal service, the kitchen is very hot and perhaps</p>						

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	<p>overpowers the effect of the ice. He indicated the residents had not been complaining to them about food temperatures.</p> <p>The Resident Council President had indicated during interview on 8/7/12 at 4:10 p.m. there had been a meeting that very day and they had talked about food temperatures again. He added, "I think we talk about it every time."</p> <p>The minutes of the last four Resident Council meetings were requested for review, but not received.</p> <p>This Federal tag relates to Complaints IN00113092 and IN00113796.</p> <p>3.1-21(a)(2)</p>						

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